

New Application Data Sheet

Inventor Information

Inventor One Given Name: David P. Greene
Family Name:
Postal Address Line One: 36 Overlook Road
City: Ossining
State or Province: New York
Postal or Zip Code: 10562
Citizenship Country: USA

Inventor Two Given Name: Samuel Dinkin
Family Name:
Postal Address Line One: 417 Trail of the Madrones
City: Austin
State or Province: Texas
Postal or Zip Code: 78746
Citizenship Country: USA

Inventor Three Given Name: Paul A. Moskowitz
Family Name:
Postal Address Line One: 2015 Hunterbrook Avenue
City: Yorktown Heights
State or Province: New York
Postal or Zip Code: 10541
Citizenship Country: USA

Inventor Four Given Name: Stephen J. Boies
Family Name:
Postal Address Line One: 57 Circle Way
City: Mahopac
State or Province: New York
Postal or Zip Code: 10541
Citizenship Country: USA

Inventor Four Given Name: Stephen J. Boies
Family Name:
Postal Address Line One: 57 Circle Way
City: Mahopac
State or Province: New York
Postal or Zip Code: 10541
Citizenship Country: USA

New Application Data Sheet

Inventor Six Given Name:	William Grey
Family Name:	
Postal Address Line One:	Taconic Road
City:	Millwood
State or Province:	New York
Postal or Zip Code:	10546
Citizenship Country:	USA

New Application Data Sheet

Correspondence Information

Name Line One:
Name Line Two:
Address Line One:
Address Line Two:
City:
State or Province:
Postal or Zip Code:
Telephone One:
Telephone Two:
Fax:
Electronic Mail:

Application Information

Title Line One: **A METHOD, SYSTEM, AND BUSINESS METHOD**
Title Line Two: **FOR PROVIDING A MARKETPLACE FOR**
Title Line Three: **COMPUTING CAPACITY IN A NETWORK**
Total Drawing Sheets: 6
Formal Drawings: ☒ Yes ☐ No
Application Type: U.S. Utility Application
Docket Number:

Assignee Information

This application ☐ is ☒ will be assigned to:

Assignee One Name: International Business Machines Corporation
Address Line One: New Orchard Road
Address Line Two:
City: Armonk
State or Province: New York
Postal or Zip Code: 10504
Small Entity: ☐ Yes ☒ No

Assignee Two Name:
Address Line One:
Address Line Two:
City:
State or Province:
Postal or Zip Code:
Small Entity: ☐ Yes ☒ No

New Application Data Sheet

Representative Information

Representative Customer No.: xxxx

Continuity Information

This application is a:
of Application One Serial No.:
Filing Date:

This application is a:
of Application Two Serial No.:
Filing Date:

which is a:
of Application Three Serial No.:
Filing Date:

which is a:
of Application Four Serial No.:
Filing Date:

Prior Foreign Applications

Foreign Application One Serial/Patent No:
Filing Date:
Country:
Priority Claimed:

Foreign Application Two Serial/Patent No:
Filing Date:
Country:
Priority Claimed: